Independent Citizens Redistricting Commission

Application Review and Quality Control Sheet

Applicant Name:	Janet De	nise Lawson		
7		Applicant Number:	10511	
Date Received.		Final Applicant	Pool Status:	
Recommended Applicant	Pool Status:	ania. Approare	· ·	
☑Included □	Removed	☑ Included	Removed	
REQUIREMENTS:				
2. Was the application received before the submission deadline?			Yes Divo	
If NO, list time/date a	<u> </u>			
2. Is the application complete?			ØYes □No	
If NO, list the item(s) that need to be completed:				
3. Indicate how the applicant responded to the following questions:				
A. Student enrolled in a college/university in the City of Austin?				
If YES, consider I and II only; If NO, consider I, ii, iii, and iv:				
i. Reside in the	City of Austin?		∠Yes LINo	
ii. Registered to	vote in the City of	Austin?	√ Yes □No	
iji. Continuously	registered to vote	in the City of Austin?	☐Yes ☐No	
iv. Voted in 3 o	f the last 5 City of A	ustin general elections?	√Yes □No	
❖ Follow-up needed relate	d to REQUIREMEN	<u>[5</u> ?	□Yes ☑No	
If YES, identify issue(s) addressed and disposition:				

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CONFLICTS OF INTEREST:	The Value
Did the applicant respond "Yes" to any conflict of i	nterest questions? Lives / INo
If YES, indicate which question(s):	
	The Flag
Follow-up needed related to CONFLICTS OF INTERED	-
If YES, identify issue(s) addressed and disposition	n:
CONCICTONOV.	
CONSISTENCY:	Thu. Due
5. Are applicant answers consistent?	✓Yes □No
If NO, indicate which answer(s):	
	□yes ☑No
❖ Follow-up needed related to CONSISTENCY? ***Constitution of a relation of disposition of the second and disposition. **The second and disposition	,
If YES, identify issue(s) addressed and disposition	···
KL	Review Date:
Application Reviewed By:	
Quality Control Review By:	QC Review Date: 2(2-8(13)
Follow-up Contact(s) Reviewed By:	Date: